

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **10036**Agency Name: **CHILD AND FAMILY SERVICES DIVISION**Agency Code: **409**Appropriation Unit: **3646-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **JACOB TRANSPORTATION SVCS LLC**Contractor Name: **JACOB TRANSPORTATION SVCS LLC**Address: **DBA EXECUTIVE LAS VEGAS
3950 W TOMPKINS AVE**City/State/Zip: **LAS VEGAS, NV 89103-5524**Contact/Phone: **MARY ATKINS 702/646-4661**Vendor No.: **T27020204**NV Business ID: **NV20041053028**To what State Fiscal Year(s) will the contract be charged? **2012-2013**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	44.00 %	Fees	0.00 %
X	Federal Funds	53.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	X Other funding	3.00 % Rent and Insurance

Agency Reference #: **RFP #1870**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **10/2011**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **10/31/2012**Contract term: **1 year and 31 days**4. Type of contract: **Contract**Contract description: **Transportation Svcs**

5. Purpose of contract:

This is a new contract to provide transportation services for youths ages 3-6 years old enrolled in the day treatment program for early childhood services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$708,760.00**

Other basis for payment: On average of 18 days per month for transportation of youth per day for Year One (11/1/10 ~ 10/31/11) \$1,591.00; Year two (11/1/11 ~ 10/31/12) \$1,690.00; payable within 30-45 days upon receipt of monthly invoice for services completed and subject to agency approval.

II. JUSTIFICATION

7. What conditions require that this work be done?

To provide transportation services for approximately 36 children (ages 3-6).

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State agencies or employees do not have the equipment or experience to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. If yes, list the names of vendors that submitted proposals:

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Contractor was selected as the best solution by an evaluation committee based on pre-determined evaluation criteria.

d. Last bid date: 06/01/2006 Anticipated re-bid date: 06/01/2013

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a consultant that is providing an opinion or advice as defined in S.A.M. Chapter 300? (S.A.M. states "a consultant is a person that provides information, an opinion, or advice for a fee")

No

b. Is the contractor a current employee of the State of Nevada?

No If "Yes", is contractor planning to render services while on annual leave, compensatory time, sick leave, or on his own time? (Please explain)

Not Applicable

c. Was the contractor formerly employed by the State of Nevada within the past one (1) year?

No If "Yes", please provide employment termination date.

d. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contractor is currently providing these services to the Division of Child and Family Services; services have been satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
LLC

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

Barbara Burke, Ph: 702-486-8064

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Pending	
Division Approval	Pending	
Department Approval	Pending	
Contract Manager Approval	Pending	
Budget Analyst Approval	Pending	
Team Lead Approval	Pending	
BOE Agenda Approval	Pending	
BOE Final Approval	Pending	